



State of Kansas

Mike Hayden, Governor

Department of Health and Environment Southeast District Office

Stanley C. Grant, Ph.D., Secretary

1500 W. 7th, P.O. Box 888, Chanute, Kansas 66720-0888

(316) 431-2390

June 14, 1990

Mr. J. L. Johnson
Quality Supervisor
Teledyne Independence
Independence, Kansas 67301

Re: Correction of deficiencies observed during hazardous waste inspection
KSD981712854

Dear Mr. Johnson:

This is to acknowledge your letter dated June 12, 1990, and supporting papers, stating that the deficiencies observed during the May 4, 1990, inspection have been corrected. The nonhazardous spill cleanup (calibrating fluid) has received special waste authorization No. 5330 and will be hauled to the Resource Recovery landfill near Cherryvale. Please send this office a copy of the manifest once this shipment has been completed.

Your cooperation with the hazardous waste management program is appreciated. If you have questions concerning the inspection, please call me or contact the Kansas Department of Health and Environment, Bureau of Air & Waste Management in Topeka, phone 913/296-1500.

Sincerely yours,

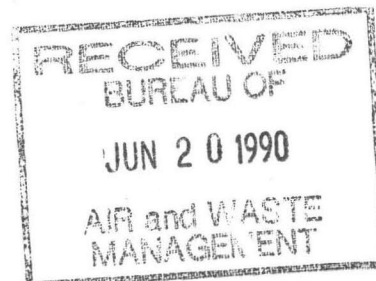
William T. Towery, R.S.
Inspections & Enforcement Section
Bureau of Air & Waste Management

WTT:jm

pc: Tom Gross, BAWM, Topeka
J. P. Goetz, BAWM, Topeka
SED, Chanute



R00076516
RCRA Records Center



Department of Health and Environment
Division of Environment

PHOTO MOUNTING SHEET

Name of Site: Teledyne Independence

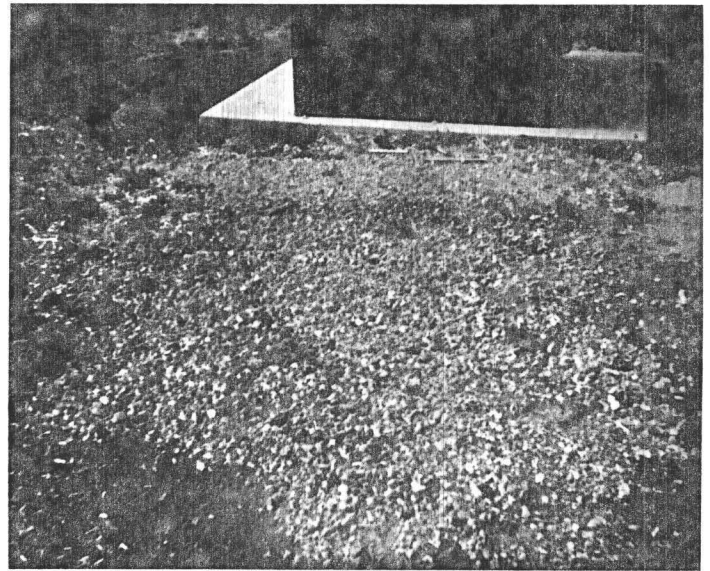
Location: City Independence County Montgomery Legal Independence Airport

No. 1

No. 2



BEFORE



AFTER

Date: May 4, 1990 Time ---

General Direction Faced: North

Weather Conditions: ---

Type of Camera: Polaroid

Additional Comments: Area of spilled
calibrating fluid.

Date: June 4, 1990 Time ---

General Direction Faced: North

Weather Conditions: ---

Type of Camera: Polaroid

Additional Comments: Same as photo No. 1.
Spill cleaned up--area covered with rock.

W. J. Lowery
William T. Lowery

HAZARDOUS WASTE COMPLIANCE MONITORING AND ENFORCEMENT LOG

1. EPA ID: <u>K S D 9 8 1 7 1 2 8 5 4</u> 2. FACILITY NAME: <u>Telodyne Independence</u> 3. CITY: <u>Independence</u> COUNTY: <u>Montgomery</u> 4. No EPA ID: <input type="checkbox"/>		5. FACILITY TYPE: <input type="checkbox"/> TSD <input checked="" type="checkbox"/> GEN <input type="checkbox"/> KG <input type="checkbox"/> SQ <input type="checkbox"/> TRANSPORTER <input type="checkbox"/> NOT A GENERATOR GOVERNMENT FACILITY: <input type="checkbox"/> PUT F, S, OR L IN BOX F - FEDERAL S - STATE L - LOCAL
6. DATE OF INITIAL EVALUATION WHICH IS THE BASIS FOR THIS REPORT: <u>05 / 04 / 90</u>	INSPECTOR: <u>Bill Towery</u> <i>6-7-90</i>	

 EPA
 THIS BLOCK
☐ GWM ☐ S.

7. TYPE OF EVALUATION COVERED BY THIS REPORT: PUT CODE IN BOX CHOOSE ONE	1 = COMPLIANCE EVALUATION INSPECTION (CEI) 2 = SAMPLING INSPECTION 3 = RECORD REVIEW	4 = COMPLIANCE GWM EVALUATION (CME) 5 = COMPLIANCE SCHEDULE EVALUATION (CSE) 11 = CASE DEVELOPMENT INSPECTION 12 = OPERATION AND MAINTENANCE EVALUATION
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8. DATE OF EVALUATION COVERED BY THIS REPORT (ENTER ONLY IF DIFFERENT FROM 6.): <u>06 / 14 / 90</u> (UPDATE)	<i>FT 6-25-90</i>
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9. AREA AND CLASS OF VIOLATION (ENTER NUMBER OF VIOLATIONS BY AREA AND CLASS):															
CLASS OF VIOLATION	AREA OF VIOLATION														
	NOT.	PRE-TRANS.	ACCUM. 90 D.	GEN FAC. STANDARDS	PREP & PREVENT	CONT. & E.P	STOR. COND.	GWM/RLS	CL/PCL	FIN REQ	PART B	COMP SCH.	MAN RPT	LAND BAN	OTHER
	I	0	0	0	0	0	0	0	0	0	0	0	0	0	0
II	0	0	0	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>	0	0	0	0	0	0	0	0	<input checked="" type="checkbox"/>

10. ENFORCEMENT ACTIONS FOR VIOLATIONS: <i>6-14-90</i>									
AREA OF VIOLATION	TYPE OF ACTION TAKEN (CIRCLE ONE)				DATE ACTION TAKEN (MDY)	COMPLIANCE DATES (MDY)		PENALTY	
						SCHEDULED	ACTUAL	ASSESSED	COLLECTED
GEN FAC. STANDARDS	INFORMAL	<u>WL/NOV</u>	AO	CivAc CRIMAc	<u>05 / 14 / 90</u>	<u>06 / 15 / 90</u>	<u>06 / 14 / 90</u>		
CONT. & E.P	INFORMAL	<u>WL/NOV</u>	AO	CivAc CRIMAc	<u>05 / 14 / 90</u>	<u>06 / 15 / 90</u>	<u>06 / 14 / 90</u>		
OTHER	INFORMAL	<u>WL/NOV</u>	AO	CivAc CRIMAc	<u>05 / 14 / 90</u>	<u>06 / 15 / 90</u>	<u>06 / 14 / 90</u>		
	INFORMAL	<u>WL/NOV</u>	AO	CivAc CRIMAc	<u> / / </u>	<u> / / </u>	<u> / / </u>		

COMMENTS: EIGHTY CHARACTER LIMIT. All deficiencies corrected. Nonhazardous cleanup wastes sent to Resource Recovery landfill.